SUBMITTED: 05/20/2024 10:51 AM

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Hearing Date: 05/20/2024 Today's Date: 05/20/2024

Agency: Ohio Department of Aging

Rule Number(s): 173-50-04 and 173-50-05

If no comments at the hearing, please check the box. \square

List organizations or individuals giving or submitting testimony before, during or after the public hearing and indicate the rule number(s) in question.

In-Person Comments:

Individual(s)/Organization(s)	Rule	Comments

Written Comments:

Individual(s)/Organization(s)	Rule	Comments

Consolidated Summary of Comments Received

Please review all comments received and complete a consolidated summary paragraph of the comments and indicate the rule number(s).

Incorporated Comments into Rule(s)

Indicate how comments received during the hearing process were incorporated into the rule(s). If no comments were incorporated, explain why not.

Comment Received	Rule	How Incorporated

HSR p(202094) d: (850401) print date: 10/31/2025 8:55 AM